

Billed Entity Name <u>Pima Partnership Charter Schools</u> Contact Name <u>Tom Miller</u>		
Billed Entity Number <u>16051398</u> Contact Telephone Number <u>520-791-2711</u>		
<b>Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected.</b> If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here: Page 2 <u>D</u>		
<p>5. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, (FRN) for which you want to take one of the following actions:</p> <p><b>Remember: The FRNs listed on this form must be for the same Funding Year as listed in Item 3, Block 1.</b></p> <p><b>New Start Date:</b> If you wish to change the Funding Year Service Start Date you listed on a previously filed Form 486 in this funding year. This action will NOT result in more funding.</p> <p><b>Contract Expiration Date:</b> If you wish to change the ending date for services. This action will not result in more funding but you could combine it with a reduction in funding.</p> <p><b>Cancel:</b> If you wish to cancel a Funding Request Number. Please note: This action is irrevocable and the FRN can NOT be reinstated later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.</p> <p><b>Reduce:</b> If you wish to reduce the amount of your funding commitment for a particular FRN. This action is irrevocable and the FRN can NOT be increased later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.</p> <p>The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.</p> <p>To launch the submission of invoices for payment, please file <b>Form 486</b>.</p>		
<b>IDENTIFICATION OF THE FRN TO BE ADJUSTED</b>		
(A) Form 471 Application Number: <u>741910</u>		
(B) Funding Request Number: <u>2003557</u>		
(C) Billing Account Number: <u>N/A</u>		
(D) Service Provider Name: <u>Inventive Technology</u>		
(E) Service Provider SPIN: <u>143028632</u>		
<b>ADJUSTMENT TO FRN LISTED ABOVE:</b>		
<b>(F) Service Start Date</b>	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
<b>(G) Contract Expiration Date</b>	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date	<u>6-30-2011</u>	<u>6-30-2012</u>
<b>(H) Cancel FRN</b>	Original Commitment Amount:	New Commitment Amount:
Please Cancel		<b>\$0.00</b>
<b>(I) Reduce FRN</b>	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
Please Reduce		

Billed Entity Name Pima Partnership Charter Schools Contact Name Tom Miller

Billed Entity Number 16051398 Contact Telephone Number 520-791-2711

**Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected.** If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here:  
Page 2 E

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To launch the submission of invoices for payment, please file **Form 486**.

#### IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number: 74910  
(B) Funding Request Number: 2003565  
(C) Billing Account Number: N/A  
(D) Service Provider Name: JNR Networks  
(E) Service Provider SPIN: 143033197

#### ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date	<u>6-30-2011</u>	<u>6-30-2012</u>
(H) Cancel FRN	Original Commitment Amount:	New Commitment Amount:
Please Cancel		<b>\$0.00</b>
(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
Please Reduce		



Do Not Write In This Area

Billed Entity Name Pima Partnership Charter Schools Contact Name Tom Miller

Billed Entity Number 16051398 Contact Telephone Number 520 791 2711

**Block 3: Certification**

7. I certify that I am authorized to submit this form on behalf of the above-named billed entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.
8. I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services.
9. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.

10. Signature <u>Robert D. Rice</u>	11. Date <u>7-12-2011</u>
12. Printed name of authorized person <u>Robert D. Rice</u>	
13. Title or position of authorized person <u>President</u>	
14. Telephone number of authorized person <u>248-446-8125</u>	
15. E-Mail address of authorized person <u>bob@triple-r.us</u>	
16. Address of authorized person <u>P.O. Box 302 South Lyon, MI 48178</u>	

A paper copy of this form, with an authorized signature in Block 3, Item 10 should be mailed to:

SLD Form 500  
P. O. Box 7026  
Lawrence, Kansas 66044-7026

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form should be mailed to:

SLD-Forms  
ATTN: SLD Form 500  
3833 Greenway Drive  
Lawrence, Kansas 66046  
888-203-8100

**Universal Service for Schools and Libraries  
Adjustment to Funding Commitment and  
Modification to Receipt of Service Confirmation Form**

**Please read instructions before completing.**

(To be completed by Schools and Libraries or Consortia.)

Applicant's Form Identifier:

(Create your own code to identify THIS Form 500)

Form 500 Application Number:

(To be assigned by administrator.)

**Block 1: Applicant Information**

1. Name of Billed Entity <i>Phoenix Partnership High School</i>	2. Billed Entity Number <i>16057025</i>	3. Funding Year <i>2010</i>
4. Complete Mailing Address of Billed Entity Applicant Street Address, P. O. Box or Route Number      City      State      Zip Code		
<i>3130 East Broadway, Suite 180      Tucson      AZ      85716</i>		
10-Digit Phone Number <i>520-791-2711</i>	Fax Telephone Number <i>520-326-2711</i>	Email Address <i>tmiller@thepartnership.us</i>
5. Contact Person Information		
Contact Person Name <i>Tom Miller</i>		
Mailing Address Street Address, P. O. Box or Route Number      City      State      Zip Code		
<i>3130 East Broadway, Suite 180      Tucson      AZ      85716</i>		
10-Digit Phone Number <i>520-791-2711</i>	Fax Telephone Number <i>520-326-2711</i>	Email Address <i>tmiller@thepartnership.us</i>

**FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT**

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PER, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to [PRA@fcc.gov](mailto:PRA@fcc.gov). PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

**THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.**



Billed Entity Name Phoenix Partnership High School Contact Name Tom Miller

Billed Entity Number 110057025 Contact Telephone Number 520-326-2711

**Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected.** If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here:  
Page 2 A

5. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, (FRN) for which you want to take one of the following actions:

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To launch the submission of invoices for payment, please file **Form 486**.

**IDENTIFICATION OF THE FRN TO BE ADJUSTED**

(A) Form 471 Application Number: 753085

(B) Funding Request Number: 2034990

(C) Billing Account Number: N/A

(D) Service Provider Name: JNR Networks

(E) Service Provider SPIN: 143033197

**ADJUSTMENT TO FRN LISTED ABOVE:**

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date	<u>6-30-2011</u>	<u>6-30-2012</u>
(H) Cancel FRN	Original Commitment Amount:	New Commitment Amount:
Please Cancel		<b>\$0.00</b>
(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
Please Reduce		

Billed Entity Name <u>Phoenix Partnership High School</u>		Contact Name <u>Tom Miller</u>
Billed Entity Number <u>16057025</u>		Contact Telephone Number <u>520-326-2711</u>

**Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected.** If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here:  
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**IDENTIFICATION OF THE FRN TO BE ADJUSTED**

(A) Form 471 Application Number: <u>753085</u>
(B) Funding Request Number: <u>2035002</u>
(C) Billing Account Number: <u>N/A</u>
(D) Service Provider Name: <u>World Wide Technology</u>
(E) Service Provider SPIN: <u>143020028</u>

**ADJUSTMENT TO FRN LISTED ABOVE:**

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date	<u>6-30-2011</u>	<u>6-30-2012</u>
(H) Cancel FRN	Original Commitment Amount:	New Commitment Amount:
Please Cancel		<b>\$0.00</b>
(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
Please Reduce		



Billed Entity Name Phoenix Partnership High School Contact Name Tom Miller  
 Billed Entity Number 16057025 Contact Telephone Number 620-326-2711

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**IDENTIFICATION OF THE FRN TO BE ADJUSTED**

(A) Form 471 Application Number: 753085  
 (B) Funding Request Number: 2035035  
 (C) Billing Account Number: N/A  
 (D) Service Provider Name: INR Networks  
 (E) Service Provider SPIN: 143033197

**ADJUSTMENT TO FRN LISTED ABOVE:**

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date	<u>6-30-2011</u>	<u>6-30-2012</u>
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Please Cancel		<b>\$0.00</b>
(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
Please Reduce		

Billed Entity Name <u>Phoenix Partnership High School</u>		Contact Name <u>Tom Miller</u>
Billed Entity Number <u>16057025</u>		Contact Telephone Number <u>520-326-2711</u>

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**IDENTIFICATION OF THE FRN TO BE ADJUSTED**

(A) Form 471 Application Number: <u>753085</u>
(B) Funding Request Number: <u>2035020</u>
(C) Billing Account Number: <u>N/A</u>
(D) Service Provider Name: <u>INR Networks</u>
(E) Service Provider SPIN: <u>143033197</u>

**ADJUSTMENT TO FRN LISTED ABOVE:**

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
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Please Reduce		



Billed Entity Name Phoenix Partnership High School Contact Name Tom Miller

Billed Entity Number 16057025 Contact Telephone Number 520-791-2711

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**IDENTIFICATION OF THE FRN TO BE ADJUSTED**

(A) Form 471 Application Number: 753085

(B) Funding Request Number: 2035048

(C) Billing Account Number: N/A

(D) Service Provider Name: Inventive Technology

(E) Service Provider SPIN: 143028632

**ADJUSTMENT TO FRN LISTED ABOVE:**

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date		
(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
Change Date	<u>6-30-2011</u>	<u>6-30-2012</u>
(H) Cancel FRN	Original Commitment Amount:	New Commitment Amount:
Please Cancel		<b>\$0.00</b>
(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
Please Reduce		

Do Not Write In This Area

Billed Entity Name Phoenix Partnership High School Contact Name Tom Miller  
Billed Entity Number 16057025 Contact Telephone Number 520-791-2711

**Block 3: Certification**

7. I certify that I am authorized to submit this form on behalf of the above-named billed entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.
8. I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services.
9. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.

10. Signature <u>Robert D. Rive</u>	11. Date <u>6-29-2011</u>
12. Printed name of authorized person <u>Robert D. Rive</u>	
13. Title or position of authorized person <u>President</u>	
14. Telephone number of authorized person <u>248-446-8125</u>	
15. E-Mail address of authorized person <u>bdr@tride-r.us</u>	
16. Address of authorized person <u>P.O. Box 302 South Lyon, MI 48178</u>	

A paper copy of this form, with an authorized signature in Block 3, Item 10 should be mailed to:

SLD Form 500  
P. O. Box 7026  
Lawrence, Kansas 66044-7026

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form should be mailed to:

SLD-Forms  
ATTN: SLD Form 500  
3833 Greenway Drive  
Lawrence, Kansas 66046  
888-203-8100



## EXHIBIT C

**From:** [REDACTED]  
**Sent:** Monday, October 31, 2011 7:14 AM  
**To:** [REDACTED]  
**Subject:** FRN#2003540/FY12-PPHS-010

Good morning,

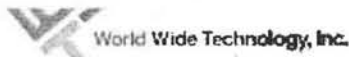
I am reaching out to you for assistance on the subject PO. I have two invoices that have come back unpaid from USAC for the following reason, "Billed Date After Contract Expiration Date;224;Billed Date Outside of Funding Year;285;"

I have tried submitting it under the subject PO and I have also tried submitting it under FRN #2003569 and still received the same response as above. Should I have used a different PO # with the other FRN#? Please advise.

Contract date extended  
previously w/Form 500

Thanks,

[REDACTED]  
[REDACTED]  
World Wide Technology, Inc.  
Federal Accounts Receivables  
Phone (314) 569 - 7056  
Faxpress (314) 301 - 2727  
International 001 314 569 7056



**BEST**  
PLACES TO  
WORK

## EXHIBIT D

Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 21, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Pima Partnership Charter Schools **District BEN:** 16051398

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 741910

**FRN:** 2003525, 2003548, 2003565

**Service Provider:** JNR Networks LLC

**SPIN:** 143033197

**Invoice Amount 2003525: \$12,735.00**

**Invoice Amount 2003548: \$15,346.80**

**Invoice Amount 2003565: \$15,165.00**

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf of Pima Partnership Charter Schools, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants



Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 21, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Pima Partnership Charter Schools **District BEN:** 16051398

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 741910

**FRN:** 2003540

**Service Provider:** World Wide Technology, Inc.

**SPIN:** 143020028

**Invoice Amount:** \$101,806.40

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf of Pima Partnership Charter Schools, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants

Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 21, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**  
**District Name:** Pima Partnership Charter Schools **District BEN:** 16051398  
**Contact Person:** Tom Miller  
**Contact Person Telephone:** 520-791-2711  
**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)  
**Form 471 Number:** 741910  
**FRN:** 2003557  
**Service Provider:** Inventive Technology, Inc.  
**SPIN:** 143028632  
**Invoice Amount:** \$190,019.00

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf of Pima Partnership Charter Schools, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants



Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 21, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Phoenix Partnership High School **District BEN:** 16057025

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 753085

**FRN:** 2035002

**Service Provider:** World Wide Technology, Inc.

**SPIN:** 143020028

**Invoice Amount : \$124,766.40**

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf Phoenix Partnership High School, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

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[bob@triple-r.us](mailto:bob@triple-r.us)

November 21, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Phoenix Partnership High School **District BEN:** 16057025

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 753085

**FRN:** 2035048

**Service Provider:** Inventive Technology, Inc.

**SPIN:** 143028632

**Invoice Amount : \$127,851.00**

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf Phoenix Partnership High School, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants



**EXHIBIT E**

From: [REDACTED]

**Sent:** Wednesday, November 30, 2011 11:21 AM

**To:** bob@triple-r.us; Robert Rice@1-248-446-8125

**Subject:** Deadline Extension request for PIMA PARTNERSHIP CHARTER SCHOOLS FRN 2003540 & FRN 2003557, 471# 741910

**Importance:** High

To: Robert Rice

Please note that your Service Deadline Extension for Case# 22-295470, dated 11/21/2011 for Form 471# 741910, FRN: 2003540 did not have the attached Service Deadline Extension Request letter.

Also for your Service Deadline Extension for Case# 22-295471, dated 11/21/2011 for Form 471# 741910, FRN: 2003557 did not have the attached Service Deadline Extension Request letter.

Please provide me with your Service Deadline Extension letter for the above FRNs with the reason for the extension request.

Thank you for your cooperation and continued support of the Universal Service Program.

Sincerely,

[REDACTED]  
**Associate Manager, SLD Invoicing**

30 Lanidex Plaza West | Parsippany, NJ 07054

T: 973.581.5263 | F: 973.599.6582

[REDACTED] [salservice.org](mailto:salservice.org)

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Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 30, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Pima Partnership Charter Schools **District BEN:** 16051398

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 741910

**FRN:** 2003540

**Service Provider:** World Wide Technology, Inc.

**SPIN:** 143020028

**Invoice Amount:** \$101,806.40

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf of Pima Partnership Charter Schools, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants



Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 30, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Pima Partnership Charter Schools **District BEN:** 16051398

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 741910

**FRN:** 2003557

**Service Provider:** Inventive Technology, Inc.

**SPIN:** 143028632

**Invoice Amount:** \$190,019.00

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf of Pima Partnership Charter Schools, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants

**From:** [REDACTED]  
**Sent:** Wednesday, November 30, 2011 1:29 PM  
**To:** bob@triple-r.us; Robert Rice@1-248-446-8125  
**Subject:** Deadline Extension request for PHOENIX PARTNERSHIP HIGH SCHOOL FRN 2035048, 2035002 471# 753085  
**Importance:** High

To: Robert Rice

Please note your Service Deadline Extension for Case# 22-295474, dated 11/21/2011 for Form 471# 753085, FRN: 2035048 did not have the attached Service Deadline Extension Request letter.

And your Service Deadline Extension for Case# 22-295476, dated 11/21/2011 for Form 471# 753085, FRN: 2035002 did not have the attached Service Deadline Extension Request letter.

Please provide me with your Service Deadline Extension letter for the above FRNs with the reason for the extension request.

Thank you for your cooperation and continued support of the Universal Service Program.

Sincerely,

[REDACTED]  
**Associate Manager, SLD Invoicing**  
30 Lanidex Plaza West | Parsippany, NJ 07054  
T: 973.581.5263 | F: 973.599.6582  
[REDACTED].universalservice.org

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Robert D. Rice  
Triple R Consultants  
P.O. Box 302  
South Lyon, MI 48178  
[bob@triple-r.us](mailto:bob@triple-r.us)

November 30, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Phoenix Partnership High School **District BEN:** 16057025

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 753085

**FRN:** 2035048

**Service Provider:** Inventive Technology, Inc.

**SPIN:** 143028632

**Invoice Amount : \$127,851.00**

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf Phoenix Partnership High School, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
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Robert D. Rice  
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P.O. Box 302  
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[bob@triple-r.us](mailto:bob@triple-r.us)

November 30, 2011

Service Delivery Deadline Extension Request  
Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West  
PO Box 685  
Parsippany, NJ 07054-0685

**FAX: 973.599.6526**

**RE: Service Delivery Deadline Extension Request**

**District Name:** Phoenix Partnership High School **District BEN:** 16057025

**Contact Person:** Tom Miller

**Contact Person Telephone:** 520-791-2711

**Contact Person Email:** [tmiller@thepartnership.us](mailto:tmiller@thepartnership.us)

**Form 471 Number:** 753085

**FRN:** 2035002

**Service Provider:** World Wide Technology, Inc.

**SPIN:** 143020028

**Invoice Amount : \$124,766.40**

To Whom It May Concern:

I, Robert D. Rice, President, Triple R Consultants, and on behalf Phoenix Partnership High School, request an service delivery deadline extension for the following allowable reason: The applicant requested an extension because the service provider was unable to complete delivery and installation for reasons beyond the service provider's control..

Respectfully,



Robert D. Rice  
Triple R Consultants

**From:** [REDACTED]  
**Sent:** Wednesday, November 30, 2011 2:27 PM  
**To:** Robert Rice@1-248-446-8125; bob@triple-r.us  
**Subject:** Deadline Extension request for PIMA PARTNERSHIP CHARTER SCHOOLS FRN 2003525, 471# 741910

To: Robert Rice

Please note that your Service Deadline Extension for Case# 22-295538, dated 11/21/2011 for Form 471# 741910, FRN: 2003540 did not have the attached Service Deadline Extension Request letter.

Also for your Service Deadline Extension for Case# 22-295541, dated 11/21/2011 for Form 471# 741910, FRN: 2003565 did not have the attached Service Deadline Extension Request letter.

Please provide me with your Service Deadline Extension letter for the above FRNs with the reason for the extension request.

Thank you for your cooperation and continued support of the Universal Service Program.

Sincerely,

[REDACTED]  
**Associate Manager, SLD Invoicing**  
30 Lanidex Plaza West | Parsippany, NJ 07054  
T: 973.581.5263 | F: 973.599.6582  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, November 30, 2011 2:29 PM  
**To:** Robert Rice@1-248-446-8125; bob@triple-r.us  
**Subject:** Deadline Extension request for PIMA PARTNERSHIP CHARTER SCHOOLS FRN 2003450, 2003565 471# 741910

This is the correct email for FRNs 2003450, 2003565.

To: Robert Rice

Please note that your Service Deadline Extension for Case# 22-295538, dated 11/21/2011 for Form 471# 741910, FRN: 2003540 did not have the attached Service Deadline Extension Request letter.

Also for your Service Deadline Extension for Case# 22-295541, dated 11/21/2011 for Form 471# 741910, FRN: 2003565 did not have the attached Service Deadline Extension Request letter.

Please provide me with your Service Deadline Extension letter for the above FRNs with the reason for the extension request.

Thank you for your cooperation and continued support of the Universal Service Program.

Sincerely,

[REDACTED]  
**Associate Manager, SLD Invoicing**

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[REDACTED] [versalservice.org](http://versalservice.org)

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**From:** [REDACTED]  
**Sent:** Wednesday, November 30, 2011 2:46 PM  
**To:** Robert Rice@1-248-446-8125; bob@triple-r.us  
**Subject:** Deadline Extension request for PIMA PARTNERSHIP CHARTER SCHOOLS FRN 2003525, 2003565 471# 741910

So Sorry. I did not have the correct FRNs. Corrected FRN 2003450 to FRN 2003525.

This is the correct email for FRNs 2003525, 2003565.

To: Robert Rice

Please note that your Service Deadline Extension for Case# 22-295538, dated 11/21/2011 for Form 471# 741910, FRN: 2003525 did not have the attached Service Deadline Extension Request letter.

Also for your Service Deadline Extension for Case# 22-295541, dated 11/21/2011 for Form 471# 741910, FRN: 2003565 did not have the attached Service Deadline Extension Request letter.

Please provide me with your Service Deadline Extension letter for the above FRNs with the reason for the extension request.

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Sincerely,

[REDACTED]  
**Associate Manager, SLD Invoicing**  
30 Lanidex Plaza West | Parsippany, NJ 07054  
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[REDACTED] [universal-service.org](http://universal-service.org)

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